Application Data Sheet

Application Information

Application number::

02/19/2002 Filing Date::

Application Type:: Regular

Utility Subject Matter::

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Computer Readable Form (CRF)?:: No

SYSTEM AND METHOD FOR SELECTION Title::

OF A PRIMARY CARE PHYSICIAN

010124-0288 **Attorney Docket Number::**

Request for Early Publication?:: No

Request for Non-Publication?:: No

1 **Suggested Drawing Figure::**

2 **Total Drawing Sheets::**

No **Small Entity?::**

No Petition included?::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Full Capacity

Status::

Given Name:: Christopher J. Family Name:: Bonin

City of Residence:: Greenfield

State or Province of WI

Residence::

Country of Residence:: US

Street of mailing address:: 4554 River Ridge Drive

City of mailing address:: Greenfield

State or Province of mailing WI

address::

Postal or Zip Code of mailing 53228

address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Carolyn

Family Name:: MacIver

City of Residence:: Whitefish Bay

State or Province of WI

Residence::

Country of Residence:: US

Street of mailing address:: 5834 North Maitland Ct.

City of mailing address:: Whitefish Bay

State or Province of mailing WI

address::

Postal or Zip Code of mailing 53217

address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mary

Family Name:: Fields

City of Residence:: New Berlin

State or Province of WI

Residence::

Country of Residence:: US

Street of mailing address:: 13805 West Maria Dr.

City of mailing address:: New Berlin

State or Province of mailing WI

address::

Postal or Zip Code of mailing 53151

address::

Correspondence Information

Name:: James A. Wilke

Street of mailing address:: Foley & Lardner, Firstar Center

777 East Wisconsin Avenue

City of mailing address:: Milwaukee

State or Province of mailing Wisconsin

address::

Postal or Zip Code of mailing 53202-5367

address::

Phone number:: (414) 297-5776

Fax Number:: (414) 297-4900

E-Mail address:: jwilke@foleylaw.com

Representative Information

Representative Designation::	Registration Number::	Representative
		Name::
Primary	46,521	SCOTT D.
		ANDERSON
Primary	29,512	RUSSELL J. BARRON
Primary	39,902	DAVID J. BATES
Primary	42,308	STEVEN C. BECKER
Primary	22,022	EDWARD W. BROWN
Primary	35,093	CHARLES G. CARTER
Primary	44,603	ALISTAIR K. CHAN
Primary	26,416	JOHN C. COOPER III
Primary	22,205	WILLIAM J. DICK
Primary	30,844	BARRY L.
		GROSSMAN
Primary	47,619	JEFFREY S.
		GUNDERSEN
Primary	44,787	PAUL S. HUNTER
Primary	48,367	JOHN M. LAZARUS
Primary	47,746	KENNETH G. LEMKE
Primary	40,365	KEITH D.
		LINDENBAUM
Primary	39,282	DAVID G. LUETTGEN
Primary	35,610	RICHARD J. MC
		KENNA
Primary	32,505	JAMES G. MORROW
Primary	45,651	JASON E. PAULS
Primary	38,276	TODD A. RATHE
Primary	30,128	MICHAEL D. RECHTIN
Primary	48,580	MARCUS W. SPROW
Primary	47,959	M. REED STAHELI

Primary	44,456	CHRISTOPHER M.
		TUROSKI
Primary	38,646	JOHN A. VANOPHEM
Primary	34,279	JAMES A. WILKE
Primary	35,421	JOSEPH N. ZIEBERT
Primary	40,883	WALTER E.
		ZIMMERMAN

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
		60/270,024	2/20/01

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::

Aurora Health Care, Inc.